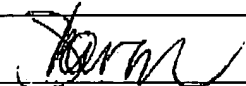


FITZPATRICK, CELLA, HARPER & SCINTO

650 Town Center Drive
Suite 1600
Costa Mesa, California 92626-7130
(714)540-8700

Facsimile:(714)540-9823

FACSIMILE COVER SHEET

TO:	Veronica Faison Group Art Unit 1755		
FROM:	Michael K. O'Neill		
RE:	U.S. Application No. 09/923,993 Our Ref.: 03500.015659		
FAX NO.:	571-273-1366		
DATE:	February 4, 2004	NO. OF PAGES:	20 <small>(including cover page)</small>
TIME:	11:44	SENT BY:	

MESSAGE**INFORMAL PAPERS
PLEASE DELIVER TO EXAMINER FAISON**

Examiner Faison:

Attached is a copy of the Amendment dated November 6, 2003, together with a copy of a postcard receipt for the above case, as you requested during our telephone conversation on Monday, February 2, 2004.

**IF YOU DO NOT RECEIVE ALL THE PAGES
PLEASE CALL 714-540-8700 AS SOON AS POSSIBLE.**

Note: We are transmitting from a Canon Model FAX-L770
(compatible with any Group I, Group II or Group III machine).

THIS FACSIMILE MESSAGE AND ACCOMPANYING DOCUMENTS ARE INTENDED ONLY FOR THE USE OF THE ADDRESSEE INDICATED ABOVE. INFORMATION THAT IS PRIVILEGED OR OTHERWISE CONFIDENTIAL MAY BE CONTAINED THEREIN. IF YOU ARE NOT THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, REVIEW OR USE OF THIS MESSAGE, DOCUMENTS OR INFORMATION CONTAINED THEREIN IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS MESSAGE IN ERROR, PLEASE NOTIFY US IMMEDIATELY BY TELEPHONE OR FACSIMILE AND MAIL THE ORIGINAL TO US AT THE ABOVE ADDRESS. THANK YOU.

MAIL STOP NON-FEE AMENDMENT

Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

Date 11/6/03
Mo. Day Yr.
Ary. Docket 03500
015659
Application No. 01/923,993

Sir:

Kindly acknowledge receipt of the accompanying:

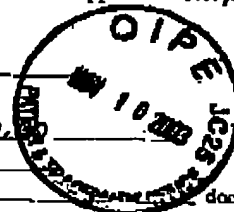
- ☒ Response to Official Action. dated 5/6/03
- ☐ Check for \$ _____ (claims fee)
- ☒ Petition under 37 CFR 1.136 and Check for \$ 950.00
- ☐ Notice of Appeal and Check for \$ _____
- ☐ Information Disclosure Statement, PTO-1449 and _____ documents
- ☐ Claim for priority and certified copies of _____ priority applications
- ☐ Issue fee transmittal and Check for \$ _____
- ☒ Other (specify) Amend, Trans.

by placing your receiving date stamp hereon and mailing or returning to deliverer.

Ary. DAD/sa

Due Date 11/6/03
Mo. Day Yr.

37 CFR 1.8 ☒
37 CFR 1.10 ☐
By Hand ☐



FOE-8-08

In re Application of:

SHINICHI HAKAMADA et al.

Application No.: 09/923,993

Filed: August 8, 2001

For: FLUORESCENT INK, AND INK CARTRIDGE,
RECORDING UNIT, INK-JET RECORDING
METHOD, AND INK-JET RECORDING
APPARATUS EMPLOYING THE
FLUORESCENT INK

Docket No.

03500.015659.

Examiner: V. Faison

Group Art Unit: 1755

Date: November 6, 2003

Mail Stop Non-Fee Amendment
THE COMMISSIONER FOR PATENTS.
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 36	MINUS	** 82	= 0	x \$9 \$18	0
INDEP. CLAIMS	* 1	MINUS	*** 3	= 0	x \$43 \$86	0
Fee for Multiple Dependent claims \$145°/\$290						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						-0-

- * If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

I hereby certify that this correspondence is being deposited with the
United States Postal Service as first-class mail in an envelope addressed
to: Commissioner for Patents, Washington, D.C. 20231 on

November 6, 2003
(Date of Deposit)

Dennis A. Duchene (Reg. No. 40,595)
(Name of Attorney for Applicant)

Signature

November 6, 2003
Date of Signature

- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$_____ is enclosed.
- ☐ Charge \$_____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☒ A check in the amount of \$950.00 to cover the fee for a three-month extension is enclosed.
- ☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicants' undersigned attorney may be reached in our Costa Mesa, CA office at (714) 540-8700. All correspondence should continue to be directed to our address given below.

Respectfully submitted,


Attorney for Applicants

Registration No. 40,575

FITZPATRICK, CELLA, HARPER & SCINTO
30 Rockefeller Plaza
New York, New York 10112-3800
Facsimile: (212) 218-2200

Form #120
CA_MAIN 72891 v 1